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AUG - 2 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Form (RF-3)

SUMMARY SHEET

	Change in Company's premium or rate	level produced by rate revision effective	September 1, 2007
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
_	Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	16,123	<1%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (tessing our rateing for PEsticide or Herbi	rritories) or certain classes? If so, specify: cide Applicators Coverage other than Golf	Course
Brief o	description of filing. (If filing follows	rates of an advisory organization, specify of	organization):

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

All America Insurance Company
Name of Company

Mrs. Petrise Meyer
Sr Rates and Forms Analyst
Official - Title

ILLINOIS SUMMARY SHEET

FORM RF-3

Cha	nge in Company's premium or rate leve	I produced by rate revision effect	ive <u>9/1/07</u> .	
	(1)	(2) Annual Premium	(3)	
	Coverage	Volume (Illinois) *	Change (+ or -) **	
1.	Automobile Liability			
	Private Passenge			
	Commercial			
2.	Automobile Physical Damage			
	Private Passenge			
	Commercial			
3.	Liability Other than Auto	40,134.00	37.4%	
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and Machinery			
9.	Fire			
	Extended Coverag			
	Inland Marine			
	Homeowners			
	Commercial Multi-Peril			
	Crop Hail			
	Workers Compensation Other	· · · · · · · · · · · · · · · · · · ·		
10.	Line of Insurance			
	Line of madrance			
Doe	s filing only apply to certain territory (ter	rritories) or certain classes? If so	, specify No	
	, can be a series of the serie			
Brie	of description of filing (if filing follows rate	es of an advisory organization, sp	ecify organizatio	
	P General Liability Revision of Lo	ss cost mulupliers		
Ref	erence Number GL-2006-BGL1			
	* Adjusted to reflect all prior rate char	999		
*:	Adjusted to reflect all prior tale of all	iges. el which will result from application	n of new rates.	
			Arch Insurance Company	
		-	Name of Company	
			Carol Kennedy - Vice Preside	ant
			Official - Title	2116
			Onicial - Title	

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

AUG 0 8 2007

SPRINGFIELD, ILLINOIS



Form (RF-3)

SUMMARY SHEET

	Change in Company's premium or rate	level produced by rate revision effective	September 1, 2007
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
_	Commercial	0.100.640	<10/
3.	Liability Other Than Auto	\$490,642	<1%
4.	Burglary and Theft		
5.	Glass		
6. 7.	Fidelity		
7. 8.	Surety Boiler and Machinery		
o. 9.	Fire		
9. 10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does	filing only apply to certain territory (te	rritories) or certain classes? If so, specify:	
Revi	sing our rateing for PEsticide or Herbi	cide Applicators Coverage other than Golf	Course
Brief	description of filing. (If filing follows	rates of an advisory organization, specify of	organization):
na			

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

AUG 0 2 2007

SPOINICEIELD. ILLINOIS

Central Mutual Insurance Company

Name of Company

Mrs. Petrise Meyer
Sr Rates and Forms Analyst
Official - Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Chan	ge in Company's premium or rate le	evel produced by rate revision effective	01/01/2008
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
	utomobile Liability Private Passenger Commercial		
2. A	utomobile Physical Damage		
3. L	Private Passenger Commercial iability Other Than Auto	\$5,927,768.	-0.03%
	orglary and Theft		0.0070
5. G			
	idelity		
7. S			
	oiler and Machinery		
9. F			
10. E	xtended Coverage		
	nland Marine		
12. H	lomeowners		
13. C	Commercial Multi-Peril		
	Crop Hail		
15. C	OtherLine of Insurance		
	Line of Insurance		
Does Profe	filing only apply to certain territory ssional Liability. All territories and	(territories) or certain classes? If so, specif printers professional classes are affected.	y: This filing only applies to Printers
Rripf	description of filing (If filing follows	rates of an advisory organization, specify	organization): We are reducing our
rates	for our Printer's Professional Errors	s & Omissions by approximately 30% per of	lass. This reduction applies to both
the b	asic coverage as well as the Correct	tion of Work coverage.	
	sted to reflect all prior rate changes ange in Company's premium level w	s. which will result from application of new rat	es.
		The Cine	cinnati Insurance Company
		THE CIN	Name of Company
			2. Sampany
		Connie Peter	tonjes - Senior Filings Specialist
			Official – Title

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

AUG 2 0 2007

SPRINGFIELD, ILLINOIS

AUG 1 3 2007
SUMMARY SHEET SPRINGFIELD, ILLINOIS

Form (RF-3)

1.

2.

3.

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6. 7.

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9.

10.

11.

12.

13.

14.

15.

(1)

Coverage

Automobile Physical Damage

Liability Other Than Auto

Automobile Liability Private Passenger Commercial

Private Passenger Commercial

Burglary and Theft

Boiler and Machinery

Extended Coverage

Commercial Multi-Peril

Line of Insurance

Inland Marine

Homeowners

Crop Hail Other

Glass Fidelity

Surety

Fire

Change in Company's premium or rate level produced by rate revision effective

\$248,928

Annual Premium Volume (Illinois)*

	(3)
	Percent
(Change (+ or -)**
_	
-4.1%	

Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing pertains to the Technology segment of our General Liability business.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

The purpose of this filing is to reduce the proprietary general liability rates applicable to the @vantage for Technology Segment in the OneBeacon America Insurance Company and to revise the Classifications applicable to the @vantage for Technology segment in the captioned companies through the addition, deletion and regrouping of certain classes.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

The Employers' Fire Insurance Company

Name of Company

Sharm Sanspre

Sharon M. Sansone, Vice President and Director of Regulatory

Compliance

Official - Title

(RF-3)

Change in Company's premium or rate level produced by rate revision effective 09/01/07 < 00/7

(2) SUMMARY SHEERING Form (RF-3) Volume (Illinois)* Coverage Automobile Liability 1. Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial -4.1% \$585,812 3. Liability Other Than Auto **Burglary and Theft** 4. 5. Glass 6. **Fidelity** 7. Surety 8. Boiler and Machinery 9. 10. **Extended Coverage** 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril Crop Hail 14. 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing pertains to the Technology segment of our General Liability business. Brief description of filing. (If filing follows rates of an advisory organization, specify organization): The purpose of this filing is to reduce the proprietary general liability rates applicable to the @vantage for Technology Segment in the OneBeacon America Insurance Company and to revise the Classifications applicable to the @vantage for Technology segment in the captioned companies through the addition, deletion and regrouping of certain classes. Adjusted to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates. OneBeacon America Insurance Company Name of Company Sharm Sansone

Sharon M. Sansone, Vice President and Director of Regulatory

Official - Title

Compliance

H29219D